Name

Signature

Please	type a	plus	sign	(+)	inside	this	box
--------	--------	------	------	-----	--------	------	-----

PATENT APPLICATION

TRANSMITTAL

Appr Patent and Trade persons are required to respond to a collection of infor

PTO/SB/05 (4/98) for use through 09/30/2000. OMB 0651-0032 ffice; U.S. DEPARTMENT OF COMMERCE less it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1 UTILITY Attorney Docket No.

First Inventor or Application Identifier

1-85

SUZUKI et al.

Title

SEMICONDUCTOR DEVICE AND METHOD FOR MANUFACTURING THE SAME Express Mail Label No. (Only for new nonprovisional applications under 37 C.F.R.§ 1.53(b)) Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 **APPLICATION ELEMENTS** ADDRESS TO: See MPEP chapter 600 concerning utility patent application contents. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Microfiche Computer Program (Appendix) Х 5. Nucleotide and/or Amino Acid Sequence Submission Specification 6. X Total Pages] (if applicable, all necessary) a Computer Readable Copy -Descriptive title of the Invention b. -Cross Reference to Related Applications Paper Copy (identical to computer copy) C. Statement verifying identity of above copies -Background of the Invention ACCOMPANYING APPLICATION PARTS -Summary of the Invention -Brief Description of the Drawings Assignment Papers (cover sheet & document(s)) Х 7. -Detailed Description of the Preferred Embodiment -Claims 37 C.F.R.§ 3.73(b) Statement (when there is an assignee) Power of 8 -Abstract of the Disclosure 9. English Translation Document (if applicable) Information Disclosure Copies of IDS X 3. 23 10. Drawing(s) (35 U.S.C. 113) Total Sheets Statement (IDS)/PTO-1449 11. Oath or Declaration [Total Sheets 4 Preliminary Amendment Return Receipt Postcard (MPEP 503) (should be specifically itemized) X X Newly executed (original or copy) 12. Small Entity Copy from a prior application (37 C.F.R. .§ 1.63 (d)) Statement(s) Statement filed in prior application, 13. (for continuation/divisional with Box 16 completed Status still proper and desired (PTO/SB/09-12) Certified Copy of Priority Document(s) DELETION OF INVENTOR(S)
Signed statement attached deleting X 14. (if foreign priority is claimed) inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). 15. Other: NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28) 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: Prior application information: Examiner_ Group/Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts 17. CORRESPONDENCE ADDRESS or
Correspondence address below

			PATEINT TOODERS				
Address							
City			State		Zip Code		
Country			Telephone	(202) 220-3105	Fax	(202) 220-3106	
	Name (Print/type)	DAVID G. POSZ		Registration No. (Atto	rney/Agent)	37,701	
							Л

ode label here)

Date

(Insert Custo

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



PTO/SB/17 (12/99)
/ed for use through 09/30/2000. OMB 0651-0032
Patent and Communication of Communication of

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

F	E	É	T	R	Α	N	S	MI	T	T	A	L
			fo	r	F	Y	2	00	0			

Patent fees are subject to annual revision, Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 AND 1.28

TOTAL AMOUNT OF PAYMENT

(\$)	1	3	06

are required to respond to a confection of information driess it displays a valid Civil confection furnish.							
Complete if Known							
Application Number							
Filing Date	September 29, 2000						
First Named Inventor	SUZUKI et al.						
Examiner Name							
Group/Art Unit							
Attomey Docket No.	1-85						

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge indicated		3. ADDITIONAL FEES				
fees and credit any overpayments to:	Large i		Small E		Fee Description	Fee Paid
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)		
Account Number 50-1147	105	130	205	65	Surcharge – late filing fee or oath	
Trained:	127	50	227	25	Surcharge – late provisional filing fee or	
Deposit	139	130	139	130	cover sheet. Non-English specification	
Account Name LAW OFFICE OF DAVID G. POSZ	100	,,,,	109	100	Tron English spesification	
Charge Any Additional Fee Required		2,520	147	2,520	For filing a request for reexamination	
Onder 57 CFR 99 1.10 and 1.17	112	920*	112	920*	Requesting publication of SIR prior to	
2. 🔀 Payment Enclosed:	112	920	112	920	Examiner action	l
Check Money Other	113	1,840°	113	1,840°	Requesting publication of SIR after Examiner action	
FEE CALCULATION	115	110	215	55	Extension for reply within first month	
1. BASIC FILING FEE	116	380	216	190	Extension for reply within second month	
Large Entity Small Entity	117	870	217	435	Extension for reply within third month	
Fee Fee Fee Fee Description	118	1,360	218	680	Extension for reply within fourth month	
Code (\$)	128	1,850	228	925	Extension for reply within fifth month	
106 310 206 155 Design filing fee	119	300	219	150	Notice of Appeal	
107 480 207 240 Plant filing fee	120	300	220	150	Filing a brief in support of an appeal	
108 690 208 345 Reissue filing fee	121	260	221	130	Request for oral hearing	
114 150 214 75 Provisional filing fee	138	1,510	138	1,510	Petition to institute a public use proceeding	
	140	110	240	55	Petition to revive – unavoidable	
SUBTOTAL (1) (\$) 690	141	1,210	241	605	Petition to revive – unintentional	
2. EXTRA CLAIM FEES	142	1,210	242	605	Utility issue fee (or reissue)	
Fee from Extra Claims Below Fee Paid	143	430	243	215	Design issue fee	
Total Claims 39 - 20 19 X 18 = 342	144	580	244	290	Plant issue fee	
Independent Claims 6 - 3 3 X 78 = 234	122	130	122	130	Petitions to the Commissioner	
Multiple Dependent	123	50	123	50	Petitions related to provisional applications	
**or number previously paid, if greater, For Reissues, see below	126	240	126	240	Submission of information Disclosure Stmt	
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581	40	581	40	Recording each patent assignment per property (times number of properties)	40
103 18 203 9 Claims in excess of 20	146	690	246	345	Filing a submission after final rejection (37 CFR § 1.129(a))	
102 78 202 39 Independent claims in excess of 3	149	690	249	345	For each additional invention to be examined (37 CFR § 1.129(b))	
104 260 204 130 Multiple dependent claim, if not paid	٠					
109 78 209 39 **Reissue independent claims over original patent	Other f	ee (spe	city) _			
110 18 210 9 **Reissue claims in excess of 20 and over original patent	Other f	ee (spe	cify) _			
SUBTOTAL (2) (\$) 576	*Reduc	ed by B	asic Filir	ng Fee P	raid SUBTOTAL (3) (\$) 4	0

SUBMITTED BY Complete (if applicable)					
Name (Print/Type)	DAVID G. POSZ	Registration No. (Attorney/Agent)	37,701	Telephone	(202) 220-3105
Signature	Vaig. P			Date	9.29.00

WARNING:
Information on this form may become public. Credit card information should not be Included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant commissioner for Patents, Washington, DC 20231.

LAW OFFICE OF

DAVID G. POSZ

601 PENNSYLVANIA AVENUE, N.W. SUITE 900, SOUTH BUILDING WASHINGTON, D.C. 20004

SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

(202) 220-3105 FAX (202) 220-3106

Sept mber 29, 2000

Hon. Commissioner of Patents and Trademarks Washington, D.C. 20231

Sir:

FILING CERTIFICATE

Applicant: SUZUKI et al.

For: SEMICONDUCTOR DEVICE AND METHOD FOR

MANUFACTURING THE SAME

Docket: 1-85

Attorney: David G. Posz

Date of Deposit: September 29, 2000

I hereby certify that this certificate and the following documents are being hand-delivered to, and deposited on the above-indicated date with, Office of Initial Patent Examination at the United States Patent Office, and are addressed to the Commissioner of Patents and Trademarks/Assistant Commissioner for Patents, Washington, D.C., 20231:

- return receipt postcard;
- check for \$1306 for filing fee and assignment recordation;
- transmittal form (2 copies);
- fee calculation form (2 copies);
- 65 page specification including 39 numbered claims;
- 23 sheets of formal drawings;
- · executed declaration and power of attorney;
- assignment and recordation cover sheet;
- certified copies of four priority docs (JP 11-288250; JP 11-318232; JP 11-318233; JP 2000-104796); and
- IDS with PTO-1449 form and copies of 2 listed references.

David G. Posz